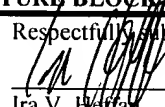


# **FEE TRANSMITTAL** FY 2004

Complete if Known	
Application Serial Number	09/750,293
Filing Date	December 29, 2000
First Named Inventor	Brady
Group Art Unit	2623
Examiner Name	K. Siangchin
Attorney Docket No.	3175-51A

METHOD OF PAYMENT				FEE CALCULATION (continued)																																																																																			
1. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other				3. ADDITIONAL FEES																																																																																			
2. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 20-0531. <input type="checkbox"/> Required Fees (copy of this sheet enclosed). <input checked="" type="checkbox"/> Additional fee required under 37 CFR 1.16 and 1.17. <input checked="" type="checkbox"/> Overpayment Credit.				<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">Large Entity Fee (\$)</th> <th style="text-align: center;">Small Entity Fee (\$)</th> <th style="text-align: left;">Fee Description</th> <th style="text-align: right;">Fee Paid</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">130</td> <td style="text-align: center;">65</td> <td>Surcharge - late filing fee or oath</td> <td></td> </tr> <tr> <td style="text-align: center;">50</td> <td style="text-align: center;">25</td> <td>Surcharge - late provisional filing fee or cover sheet</td> <td></td> </tr> <tr> <td style="text-align: center;">130</td> <td style="text-align: center;">130</td> <td>Non-English specification</td> <td></td> </tr> <tr> <td style="text-align: center;">2,520</td> <td style="text-align: center;">2,520</td> <td>Request for ex parte reexamination</td> <td></td> </tr> <tr> <td style="text-align: center;">110</td> <td style="text-align: center;">55</td> <td>Extension for reply within first month</td> <td></td> </tr> <tr> <td style="text-align: center;">420</td> <td style="text-align: center;">210</td> <td>Extension for reply within second month</td> <td style="text-align: right;">420.00</td> </tr> <tr> <td style="text-align: center;">950</td> <td style="text-align: center;">475</td> <td>Extension for reply within third month</td> <td></td> </tr> <tr> <td style="text-align: center;">1480</td> <td style="text-align: center;">740</td> <td>Extension for reply within fourth month</td> <td></td> </tr> <tr> <td style="text-align: center;">2010</td> <td style="text-align: center;">1005</td> <td>Extension for reply within fifth month</td> <td></td> </tr> <tr> <td style="text-align: center;">330</td> <td style="text-align: center;">165</td> <td>Notice of Appeal</td> <td></td> </tr> <tr> <td style="text-align: center;">330</td> <td style="text-align: center;">165</td> <td>Filing a brief in support of an appeal</td> <td></td> </tr> <tr> <td style="text-align: center;">290</td> <td style="text-align: center;">145</td> <td>Request for oral hearing</td> <td></td> </tr> <tr> <td style="text-align: center;">130</td> <td style="text-align: center;">130</td> <td>Petitions to the Commissioner</td> <td></td> </tr> <tr> <td style="text-align: center;">180</td> <td style="text-align: center;">180</td> <td>Submission of Information Disclosure Statement</td> <td></td> </tr> <tr> <td style="text-align: center;">770</td> <td style="text-align: center;">385</td> <td>Filing a submission after final rejection (37 CFR 1.129(a))</td> <td></td> </tr> <tr> <td style="text-align: center;">770</td> <td style="text-align: center;">385</td> <td>For each additional invention to be examined (37 CFR 1.129(b))</td> <td></td> </tr> <tr> <td style="text-align: center;">100</td> <td style="text-align: center;">100</td> <td>Certificate of Correction for applicant's error</td> <td></td> </tr> <tr> <td style="text-align: center;">110</td> <td style="text-align: center;">55</td> <td>Submission of Terminal Disclaimer</td> <td></td> </tr> <tr> <td colspan="2">Other fee (Specify)</td> <td>Fee for Request For Continued Examination under 37 CFR 1.114</td> <td style="text-align: right;">770.00</td> </tr> </tbody> </table>				Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid	130	65	Surcharge - late filing fee or oath		50	25	Surcharge - late provisional filing fee or cover sheet		130	130	Non-English specification		2,520	2,520	Request for ex parte reexamination		110	55	Extension for reply within first month		420	210	Extension for reply within second month	420.00	950	475	Extension for reply within third month		1480	740	Extension for reply within fourth month		2010	1005	Extension for reply within fifth month		330	165	Notice of Appeal		330	165	Filing a brief in support of an appeal		290	145	Request for oral hearing		130	130	Petitions to the Commissioner		180	180	Submission of Information Disclosure Statement		770	385	Filing a submission after final rejection (37 CFR 1.129(a))		770	385	For each additional invention to be examined (37 CFR 1.129(b))		100	100	Certificate of Correction for applicant's error		110	55	Submission of Terminal Disclaimer		Other fee (Specify)		Fee for Request For Continued Examination under 37 CFR 1.114	770.00
Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid																																																																																				
130	65	Surcharge - late filing fee or oath																																																																																					
50	25	Surcharge - late provisional filing fee or cover sheet																																																																																					
130	130	Non-English specification																																																																																					
2,520	2,520	Request for ex parte reexamination																																																																																					
110	55	Extension for reply within first month																																																																																					
420	210	Extension for reply within second month	420.00																																																																																				
950	475	Extension for reply within third month																																																																																					
1480	740	Extension for reply within fourth month																																																																																					
2010	1005	Extension for reply within fifth month																																																																																					
330	165	Notice of Appeal																																																																																					
330	165	Filing a brief in support of an appeal																																																																																					
290	145	Request for oral hearing																																																																																					
130	130	Petitions to the Commissioner																																																																																					
180	180	Submission of Information Disclosure Statement																																																																																					
770	385	Filing a submission after final rejection (37 CFR 1.129(a))																																																																																					
770	385	For each additional invention to be examined (37 CFR 1.129(b))																																																																																					
100	100	Certificate of Correction for applicant's error																																																																																					
110	55	Submission of Terminal Disclaimer																																																																																					
Other fee (Specify)		Fee for Request For Continued Examination under 37 CFR 1.114	770.00																																																																																				
<b>FEE CALCULATION</b>																																																																																							
<b>1. FILING FEE</b>																																																																																							
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Large Entity Fee (\$)</th> <th style="text-align: left;">Fee Description</th> <th style="text-align: right;">Fee Paid</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">770</td> <td>Utility filing fee</td> <td></td> </tr> <tr> <td style="text-align: center;">340</td> <td>Design filing fee</td> <td></td> </tr> <tr> <td style="text-align: center;">160</td> <td>Provisional filing fee</td> <td></td> </tr> </tbody> </table>				Large Entity Fee (\$)	Fee Description	Fee Paid	770	Utility filing fee		340	Design filing fee		160	Provisional filing fee																																																																									
Large Entity Fee (\$)	Fee Description	Fee Paid																																																																																					
770	Utility filing fee																																																																																						
340	Design filing fee																																																																																						
160	Provisional filing fee																																																																																						
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Number Filed</th> <th style="text-align: left;">Number Extra</th> <th style="text-align: left;">Rate</th> <th style="text-align: right;">Amount</th> </tr> </thead> <tbody> <tr> <td colspan="4">Total Claims - 20 = x \$ 18.00 =</td> </tr> <tr> <td colspan="4">Independent Claims - 3 = x \$ 86.00 =</td> </tr> <tr> <td colspan="4"><input type="checkbox"/> Multiple Dependent Claim(s), if any \$290.00 =</td> </tr> <tr> <td colspan="4" style="text-align: right;">TOTAL:</td> </tr> <tr> <td colspan="4" style="text-align: right;">SMALL ENTITY DISCOUNT:</td> </tr> <tr> <td colspan="3" style="text-align: right;">SUBTOTAL (1)</td> <td style="text-align: right;">(\$)</td> </tr> </tbody> </table>				Number Filed	Number Extra	Rate	Amount	Total Claims - 20 = x \$ 18.00 =				Independent Claims - 3 = x \$ 86.00 =				<input type="checkbox"/> Multiple Dependent Claim(s), if any \$290.00 =				TOTAL:				SMALL ENTITY DISCOUNT:				SUBTOTAL (1)			(\$)																																																								
Number Filed	Number Extra	Rate	Amount																																																																																				
Total Claims - 20 = x \$ 18.00 =																																																																																							
Independent Claims - 3 = x \$ 86.00 =																																																																																							
<input type="checkbox"/> Multiple Dependent Claim(s), if any \$290.00 =																																																																																							
TOTAL:																																																																																							
SMALL ENTITY DISCOUNT:																																																																																							
SUBTOTAL (1)			(\$)																																																																																				
<b>2. AMENDMENT CLAIM FEES</b>																																																																																							
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Claims Remaining After Amend.</th> <th style="text-align: left;">Highest No. Previously Paid For</th> <th style="text-align: left;">Present Extra</th> <th style="text-align: left;">Rate</th> <th style="text-align: right;">Fee Paid</th> </tr> </thead> <tbody> <tr> <td colspan="4">Total - = x \$ 18.00 =</td> <td></td> </tr> <tr> <td colspan="4">Indep. - = x \$ 86.00 =</td> <td></td> </tr> <tr> <td colspan="4"><input type="checkbox"/> First Presentation of Multiple Dep. Claim + \$290.00 =</td> <td></td> </tr> <tr> <td colspan="4" style="text-align: right;">TOTAL:</td> <td style="text-align: right;">(\$)</td> </tr> <tr> <td colspan="4" style="text-align: right;">SMALL ENTITY DISCOUNT:</td> <td style="text-align: right;">(\$)</td> </tr> <tr> <td colspan="3" style="text-align: right;">SUBTOTAL (2)</td> <td></td> <td style="text-align: right;">(\$)</td> </tr> </tbody> </table>				Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid	Total - = x \$ 18.00 =					Indep. - = x \$ 86.00 =					<input type="checkbox"/> First Presentation of Multiple Dep. Claim + \$290.00 =					TOTAL:				(\$)	SMALL ENTITY DISCOUNT:				(\$)	SUBTOTAL (2)				(\$)	<b>SUBTOTAL (3) (\$ 1,190.00)</b>																																																
Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid																																																																																			
Total - = x \$ 18.00 =																																																																																							
Indep. - = x \$ 86.00 =																																																																																							
<input type="checkbox"/> First Presentation of Multiple Dep. Claim + \$290.00 =																																																																																							
TOTAL:				(\$)																																																																																			
SMALL ENTITY DISCOUNT:				(\$)																																																																																			
SUBTOTAL (2)				(\$)																																																																																			
				<table border="1" style="width: 100%; border-collapse: collapse;"> <tbody> <tr> <td style="text-align: right;">SUBTOTAL (1)</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td style="text-align: right;">SUBTOTAL (2)</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td style="text-align: right;">SUBTOTAL (3)</td> <td style="text-align: right;">1,190.00</td> </tr> </tbody> </table>				SUBTOTAL (1)	0.00	SUBTOTAL (2)	0.00	SUBTOTAL (3)	1,190.00																																																																										
SUBTOTAL (1)	0.00																																																																																						
SUBTOTAL (2)	0.00																																																																																						
SUBTOTAL (3)	1,190.00																																																																																						
				<b>TOTAL (\$ 1,190.00)</b>																																																																																			
<b>CORRESPONDENCE ADDRESS</b>				<b>SIGNATURE BLOCK</b>																																																																																			
Direct all correspondence to: Patent Administrator Testa, Hurwitz & Thibault, LLP High Street Tower-125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100				Date: September 9, 2000 Reg. No.: 41,059 Tel. No.: (617) 248-7176 Fax No.: (617) 248-7100 Respectfully Submitted,  Ira V. Harari Attorney for the Applicants Testa, Hurwitz & Thibault, LLP High Street Tower-125 High Street Boston, MA 02110																																																																																			